

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	X/S		07/10/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AL		
RESPONSE FORMALITY REVIEW			5/31/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ↗ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	5/2/00
2	✓	✓	5/2/00
3	✓	✓	5/2/00
4	✓	✓	5/2/00
5	✓	✓	5/2/00
6	✓	✓	5/2/00
7	✓	✓	5/2/00
8	✓	✓	5/2/00
9	✓	✓	5/2/00
10	✓	✓	5/2/00
11	✓	✓	5/2/00
12	✓	✓	5/2/00
13	N	✓	5/2/00
14	N	✓	5/2/00
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19	N	✓	5/2/00
20	N	✓	5/2/00
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32	N	✓	5/2/00
33	N	✓	5/2/00
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47	N	✓	5/2/00
48	V	A	
49	V	A	
50	V	A	

Claim	Final	Original	Date
51	✓	✓	5/2/00
52	N	✓	5/2/00
53	V	✓	5/2/00
54	✓	✓	5/2/00
55	N	✓	5/2/00
56	✓	✓	5/2/00
57	✓	✓	5/2/00
58	✓	✓	5/2/00
59	N	✓	5/2/00
60	✓	✓	5/2/00
61	✓	✓	5/2/00
62	✓	✓	5/2/00
63	N	✓	5/2/00
64	✓	✓	5/2/00
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BEST AVAILABLE COPY

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet her

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